1503-137-2264

FE6AN026

FEC FORM 3X

REPORT OF RECEIPTS **AND DISBURSEMENTS**For Other Than An Authorized Committee

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1. NAME COMM	OF IITTEE (in full)	TYPE OR	PHINI ¥		r the lines.		12FE	4M5		
IN	OUR MOT	HI EIRS	NAM	E I I	1 1 1			1111		
		. 1 1. 1		1111	111					لىب
ADDRESS	(number and street)	139	WILL	5101 M 1	4, V, E, A	41E1		1 1 1 1		
L th	heck if different an previously ported. (ACC)	M, 4, 5	KE GOI	4			M J	4,9,4	<u> </u>	3,0,4,0
2. FEC I	DENTIFICATION N	UMBER ▼		CITY 🛦			STATE	L	ZIP COE	DE 🛦
C	05262	44	3	B. IS THIS REPORT	Q	NEW (N) OR		AMENDED (A))	
(Choos	OF REPORT se One)		onthly oort	Feb 20 (M2)	Lui Fin	May 20 (M:	ابها	Aug 20 (M8) Sep 20 (M9)	li	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election
(a) Q	uarterly Reports:		п	Apr 20 (M4)	П	Jul 20 (M7)	П	Oct 20 (M10	» П	Year Only) Jan 31 (YE)
	April 15 Quarterly Report (Q1) (c)	12-Day	X	Primary (1	2P)	Ge	eneral (12G)		Runoff (12R)
L	July 15 Quarterly Report (Q2)	PRE-Election Report for the		Conventio	n (12C)	_ sp	ecial (12S)		
	October 15 Quarterly Report (January 31 Year-End Report (E	lection on	M • M	/ D D /		V - V	in the State of	
	July 31 Mid-Year Report (Non-electi Year Only) (MY)	(d)	30-Day		General (30G)	Ru	unoff (30R)		Special (30S)
	Termination Repor	t	Report for th	ne: lection on	M M	04	20	ř. 4	in the State of	
5. Coveri	ing Period	Ø ′ °,	6 20	1.4	through		M / 2	4 2,0) [¥	
I certify the	at I have examined	this Report	and to the be	st of my kno	wledge an	d belief it is	true, corre	ect and compl	lete.	
Type or Pr	int Name of Treasur	er	_ Ju	lin b	JENNI	`S				
Signature	of Treasurer		Jal	wh	leun	16	Date	OI	ð 🗳 ′	2015
NOTE: Sub	mission of false, erro	neous, or inc	complete inform	nation may s	ubject the p	person signing	this Repo	ort to the pena	Ities of 2 L	J.S.C. §437g.
	Office Use							FE	C FOR Rev. 12/20	

1503: 137 2265

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)		Page 2
Write or Type Committee Name	. /	
IN OUR MOTHERS	NAME	
Réport Covering the Period: From:	0 16 2014 TO	0: 11/24/2014
	COLUMN A This Period	COLUMN B Calendar Year-to-Date
(a) Cash on Hand January 1, 2014		9.810
(b) Cash on Hand at Beginning of Reporting Period	9810	
(c) Total Receipts (from Line 19)	0.00	0.0.0
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	9810	9810
. Total Disbursements (from Line 31)	0.00	000
Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	9.8.1.0	9810
Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0 0 0	
Debts and Obligations Owed BY the Committee (Itemize all on Schedule C. and/or Schedule D)	000	
This committee has qualified as a mult	icandidate committee. (see FEC FORM 1M)	and the second s
 	For further information contact:	
	Federal Election Commission 999 E Street, NW Washington, DC 20463	
	Toll Free 800-424-9530 Local 202-694-1100	
		· · · ·

FE6AN026

FE6AN028

DETAILED SUMMARY PAGE of Receipts

Malaka and Tomas Communitation Additions		•		
Write or Type Committee Name	. /			
IN OUR MOTHERS	NAME			
Report Covering the Period: From:	16 2014 To	11124201		
neport Covering the Period. From:		Barrens Saurent Commentument Saurens S		
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
. Contributions (other than loans) From:				
(a) Individuals/Persons Other				
Than Political Committees	n n D	0 0 0		
(i) Itemized (use Schedule A)				
(ii) Unitemized	0 0 0	0.00		
(iii) TOTAL (add				
Lines 11(a)(i) and (ii)▶	0 0 0			
(b) Political Party Constitution	D 0 0	0.00		
(b) Political Party Committees				
(such as PACs)	0.00	0.00		
(d) Total Contributions (add Lines	nermeltensentlikennet Zelman Caremakke mat. Literarettearen floraret Schoore (toressell	Showing the second house of the second house o		
11(a)(iii). (b), and (c)) (Carry	0 0 0	de la company de		
Totals to Line 33, page 5)▶	0 0 0 V	1		
Transfers From Affiliated/Other Party Committees	D 0 0	0 0		
acty Continuees	To make the state of the state			
3. All Loans Received	0.60	00		
. I .	manus di manus de la manus La manus primer regular manus partir de la manus de la manus de la manus de la manus personantes de la manus d			
Loan Repayments Received	0 0 0	0.0		
5. Offsets To Operating Expenditures	and the second second and the second	Resistant Desputation work of Americal Contract Resistants & Desputation as a Contract Contra		
(Refunds, Rebates, etc.)	000			
(Carry Totals to Line 37, page 5)		0,0,0		
Refunds of Contributions Made to Federal Candidates and Other				
Political Committees	000	0.0		
7. Other Federal Receipts	and the second s			
(Dividends, Interest, etc.)	0.00	0.0		
8. Transfers from Non-Federal and Levin Funds	namen all annual de la margilla annual de margilla de margilla de margilla de Margilla (margilla annual de margilla de margill	Resource Description and district Advanced Security Proceedings and Technology Description		
(a) Non-Federal Account	The A A	0 0		
(from Schedule H3)	0.0.0			
(b) Lovin France (france Cabadyla 145)	0.00	0.0		
(b) Levin Funds (from Schedule H5)	Saint Strand Comment of Comment o			
(c) Total Transfers (add 18(a) and 18(b))	000	0.0		
, , , , , , , , , , , , , , , , , , , ,	The second Secon	handraden (? Sanken land) berken de stillend		
9. Total Receipts (add Lines 11(d),	and make a fact of the state of	Example of the second of the s		
12, 13, 14, 15, 16, 17, and 18(c))▶	0.00	b 0		
0. Total Federal Receipts				
(subtract Line 18(c) from Line 19)▶	0.00	0 0		

DETAILED SUMMARY PAGE

of Disbursements

Page 4

FEC Form 3X (Rev. 02/2003) COLUMN A COLUMN B II. Disbursements **Total This Period** Calendar Year-to-Date 21. Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4) 0.00 0_0_0 Federal Share 0 0 0 D. (ii) Non-Federal Share..... (b) Other Federal Operating 00 Expenditures (c) Total Operating Expenditures O O . 0.0 (add 21(a)(i), (a)(ii), and (b)) 22. Transfers to Affiliated/Other Party 0 0 0 ຼ0ຼ0 Committees..... 23. Contributions to Federal Candidates/Committees and Other Political Committees... 0 00 0. 24. Independent Expenditures 0 0 6 0 0 0 0 0.0 0.00 0_0_0 26. Loan Repayments Made..... 0 00 0 0 0 0 0 0.00 0 (b) Political Party Committees (c) Other Political Committees (such as PACs)..... D (d) Total Contribution Refunds 0.00 0 0 0 (add Lines 28(a), (b), and (c)).......... ▶ 0.0.0 29. Other Disbursements 30. Federal Election Activity (2 U.S.C. §431(20)) (a) Allocated Federal Election Activity (from Schedule H6) (i) Federal Share (ii) "Levin" Share..... (b) Federal Election Activity Paid: Entirely Ū With Federal Funds (c) Total Federal Election Activity (add ... Lines 30(a)(i), 30(a)(ii) and 30(b)).... ▶ 31. Total Disbursements (add Lines 21(c), 22. 00 23, 24, 25, 26, 27, 28(d), 29 and 30(c))... 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) 000 from Line 31).....

DETAIL	ED	SUMM	ARY	PAGE
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of Disbursements

FEC Form 3X (Rev. 02/2003) Page 5 COLUMN A COLUMN B III. Net Contributions/Operating Ex-**Total This Period** Calendar Year-to-Date penditures 33. Total Contributions (other than loans) (from Line 11(d), page 3) 34. Total Contribution Refunds (from Line 28(d)) 35. Net Contributions (other than loans) 0 (subtract Line 34 from Line 33) 36. Total Federal Operating Expenditures 0.00 0_ 0 0 (add Line 21(a)(i) and Line 21(b))▶ 37. Offsets to Operating Expenditures (from Line 15, page 3)..... 38. Net Operating Expenditures

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE OF (check only one)
ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	11a 11b 11c 12
Any information could from such Danada and Chateren		13 14 15 16 17
Any information copied from such Reports and Statemen or for commercial purposes, other than using the name a	and address of any political committee	to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)	,	
IN OUR MOTHER	S NAME	
Full Name (Last, First, Middle Initial) A.		Date of Receipt
Malling Address		Harry , Dag , Lagrand
City Stat	te Zip Code	
		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		
Name of Employer Occup	pation	
Receipt For: Aggre	egate Year-to-Date 🔻	1
Primary General Other (specify)		
Onici (Specify)		<u> </u>
Full Name (Last, First, Middle Initial) B.		Date of Receipt
Mailing Address		Mary , Losol , Lander
City Sta	te Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		Amount of Each receipt dis reliab
	pation	- Special services - Agents of the Article (V) Departs you the Special services are services as a service as
Receipt For:	and Varia City	
Primary General	egate Year-to-Date ▼	*
Other (specify) ▼	<u> </u>	
Full Name (Last, First, Middle Initial) C.		Date of Receipt
Mailing Address		The state of the s
City Sta	ate Zip Code	Amount of Each Possint this Poriod
FEC ID number of contributing		Amount of Each Receipt this Period
federal political committee.		I
Name of Employer Occu	pation	
	regate Year-to-Date ▼	
Primary General Other (specily) ▼	per mangatan sagar dan peruntuk per mangan sagar dan peruntuk peruntuk peruntuk peruntuk peruntuk peruntuk per Banan dan sagar Panan dan sagar dan peruntuk peruntuk peruntuk peruntuk peruntuk peruntuk peruntuk peruntuk pe]
SUPPOTAL of Possiste This Page (astisses)		000
SUBTOTAL of Receipts This Page (optional)		bearing and the second and the secon
TOTAL This Period (last page this line number only)	······	V O O

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE		PAGE OF
TEMIZED DISBURSEMENTS	for each category of the	(check only 21b	one)	24 25 26
	Detailed Summary Page	27	28a 28b	28c 29 30b
Any information copied from such Reports and Statem or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full)	,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
IN DUR MOTHE	RS NAME			<u> </u>
Full Name (Last, First, Middle Initial) A.			Date of Disbursem	ent
Mailing Address				
City	State Zip Code			
Purpose of Disbursement	Popular		Amount of Each D	isbursement this Period
Candidate Name		Category/ Type		
Office Sought: House Disburser Senate	nent For: Primary General			
President State: District:	Other (specify)			
Full Name (Last, First, Middle Initial)			<u> </u>	
В.			Date of Disbursem	ent
Mailing Address				
City	State Zip Code			
Purpose of Disbursement	9.5 9.5		Amount of Each D	isbursement this Period
Candidate Name		Category/ Type		
Office Sought: House Disburset Senate President	ment For: Primary General Other (specify)			-
State: District:				
Full Name (Last, First, Middle Initial) C.			Date of Disbursen	nent
Malling Address			W W	, , , , , , , , , , , , , , , , , , , ,
City	State Zip Code		Acceptation of Consection	
Purpose of Disbursement				
Candidate Name		Category/	Amount of Each D	Disbursement this Period
Office Sought: House Disburse	ment For:	Ту́ре	L.i.	
Senate President	Primary General Other (specify) ▼			
State: District:				
SUBTOTAL of Disbursements This Page (optional)		>		0,00
TOTAL This Period (last page this line number only)	<u>_</u>		0.00

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